



Rock Solid

CITY OF ELBERTON
ALCOHOLIC BEVERAGE LICENSE
Application for Renewal (no change)

Return completed form with payment by mail to City Clerk, PO Box 70, Elberton, Georgia or in person at City Hall located at 203 Elbert Street, Elberton, Georgia 30635.

All licenses granted under Section 4 of the Code of Ordinances shall expire on December 31st of each year and shall be renewable at the option of the Mayor and Council of the City. Licensees who desire to renew their licenses shall file an application with the required fee with the City Clerk for such renewal upon forms provided by the City Clerk no earlier than October 15th or later than November 15th of each year.

Business Name:

Business Location Physical Address:

Mailing Address (if different):

Name of applicant:

Home Address:

Date of Birth: Phone number: SSN:

Email Address:

Number of persons employed by business:

IMPORTANT: Federal Work Authorization User Identification Number (E-Verify Number): If your business employs more than 10 employees you are required to register and utilize the federal work authorization program as provided in O.C.G.A. 13-10-90.

*Federal Work Auth. User Identification No.: Authorization Date:

RETAIL/PACKAGE SALES OF DISTILLED SPIRITS LICENSE ONLY List all persons having any beneficial ownership interest in the business:

List all other business engaged in the sale of alcoholic beverages that any of the persons, firms, or corporations are associated with in any way whatsoever.

List the full name and address and other pertinent information of the owner of the building, the owner of the land and the name and address of the lessor or sub lessors:

ALCOHOLIC BEVERAGE LICENSE CALCULATION

| Classification | Fee Amount (Jan-Dec) | Fee Amount (July-Dec) | Bond | Amount Due |
|---|----------------------|-----------------------|----------------|------------|
| On premises consumption - Beer/Malt | \$500.00 | \$250.00 | \$250.00 | |
| On premises consumption - Wine | \$500.00 | \$250.00 | \$250.00 | |
| On premises consumption - Distilled Spirits | \$1,000.00 | \$500.00 | \$250.00 | |
| Retail - Beer/Malt | \$500.00 | \$250.00 | \$250.00 | |
| Retail - Wine | \$500.00 | \$250.00 | \$250.00 | |
| *Retail - Distilled Spirits (<i>requires current surety bond</i>) | \$5,000.00 | \$2,500.00 | *bond attached | |
| NOTE: Bond is carried over each year. | | | | |
| TOTAL DUE: | | | | |

*NOTE: Section 4-53. Fees and Bonds.

(b) Every retail dealer in distilled spirits package shall post with the city manager or his designee a cash bond in the sum of \$2,500.00 conditioned to abide by the ordinances of the city and the laws of the state, the bond to be retained without interest, by the city, and to be returned to the dealer at the expiration of his license, provided he has not breached the bond, the bond to be forfeited to the city in case of a breach thereof.

*Bond (carried over each year) per classification (*other than retail dealer distilled spirits package*). No bond renewal is required for businesses that are simply renewing their existing license, with no classification change. For businesses that are adding a new classification, they will be required to submit a bond for that classification.

OATH AND ACKNOWLEDGEMENT

I do hereby solemnly swear, subject to criminal penalties for false swearing, the statements and answers made to the foregoing question in this application for a license to sell alcoholic beverage in the City of Elberton, Georgia are true and complete, and no false or fraudulent statement or answer is made herein to procure granting of a license, that any license issued pursuant to this application is conditional upon the truth of the answers and statements made herein and that any false or fraudulent statement or answers herein shall constitute cause for the suspension or revocation of any license issued pursuant to this application. Should any additional change occur during the year for which a license is issued pursuant to this application which would require a different answer to any question contained in this application, such change must be reported as a written amendment to this application on file with the City Clerk within five days of the change. Failure to make such amendment shall be a cause for the suspension or revocation of any license issued.

I further do hereby solemnly swear that I am/are at least twenty-one (21) years of age and a legal resident of the United States; have not been convicted of a felony or any violation of the law of this state or any other state, relating to the sale of alcoholic beverages, or possession, distribution, transportation, or manufacture, or sale of a controlled substance within the ten (10) year period immediately preceding the filing of this application; not employed anyone that has been convicted of a felony, or any violation of the law of this state or any other state, relating to the sale of alcoholic beverages, or possession, distribution, transportation, or manufacture, or sale of a controlled substance within the five (5) year period immediately preceding the filing of this application.

| | | |
|-----------|-------|------|
| Signature | Title | Date |
|-----------|-------|------|

NOTARY and SEAL:

| | |
|------------------|-------------|
| Notary Signature | Date Signed |
|------------------|-------------|

E-VERIFY AFFIDAVIT
Pursuant to O.C.G.A. 36-60-6(d)

***To be completed by all owners of business.**

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for license, permit, or other document required to operate a business in O.C.G.A. 36-60-6(d):

Check one:

a. On January 1, of previous year, the individual, firm, or corporation employed more than ten (10) employees

b. On January 1, of previous year, the individual, firm, or corporation employed ten (10) or fewer employees.

The employer has registered with and utilizes the federal work authorization program in accordance with the application provisions and deadlines established in O.C.G.A. 36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization is as follows:

Name of Private Employer

Federal Work Authorization User Id No

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Signature of Authorized Officer or Agent

Print Name of and Title of Authorized Officer, or Agent

(SEAL)

SWORN TO AND SUBSCRIBED BEFORE ME THIS

_____ DAY OF _____, _____.

NOTARY PUBLIC

To register for the E-Verify Program, go to the U.S. Citizenship and Immigration Services website (www.uscis.gov).

